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UTAH DIVISION OF
SOLID & HAZARDOUS WASTE

2006 SOLID WASTE LANDFILL ANNUAL REPORT

For Calendar year 2005 or most recent fiscal year

Administrative Information

Facility Name: Weber Properties LLC
Facility Mailing Address: P.O. Box 12847
(Number & Street, Box and/or Route)
City: Ogden, State: Utah Zip Code: 84412
County: Weber

Contact's Name: Wil van der Stappen Phone No.: (801) 731-7882
Title: President
Contact's Mailing Address: Same as above
Contact's Email Address: wil advancedpaving.net

Owner

Name: Weber Properties LLC Phone No.: (801) 731-7882
Mailing Address: P.O. Box 12847
(Number & Street, Box and/or Route)
City: Ogden, State: Utah Zip Code: 84412

Operator (Complete this section only if the operator is not an employee of the Owner shown above)

Name: Advanced Paving & Const. Phone No.: (801) 731-7882
Mailing Address: P.O. Box 12847
(Number & Street, Box and/or Route)
City: Ogden, State: Utah Zip Code: 84412

Facility Type and Status

☐ Class I ☐ Class IIIb ☐ Class V
☐ Class II ☐ Class IVa ☐ Class VI
☐ Class IIIa ☒ Class IVb

Does the facility have a construction and demolition (C/D) cell as part of the permit (not operated under a separate permit number)? Yes _____ No XX

If facility was permanently closed during the year enter date closed: N/A

Annual Disposal

Total facility tons: _____ or cubic yards: 5,730

If separate tonnages are available

Municipal tons: _____ or cubic yards: _____

C/D tons: _____ or cubic yards: _____

Industrial tons: _____ or cubic yards: 5,730

Conversion Factor used

- ☐ No conversion factors used
☐ Conversion factor from rules (R315-302-2(4)(c)) used
☒ Site specific conversion used Please list: Load count

Tons Recycled: _____

Cubic Yards Recycled: 3,250

Financial Assurance

Current Closure Cost Estimate: \$23,814.00

Current Post-Closure Cost Estimate: \$ 1,900.00

Current Financial Assurance Mechanism: Bond

(ie. Bond, Trust Fund, Corporate or government Test etc.)

Financial Assurance Mechanism Holder: SAFECO, Bond 5902674

(ie. Name of Bond Company, Bank etc.. If PTIF Account give account number)

Current Amount or Balance in Mechanism: N/A

Other Required Reports

Financial Assurance: Each facility must recalculate the cost of closure and post-closure care to account for inflation and design changes each year. The recalculation, along with proof that the new cost estimates are fully covered by the assurance mechanism currently be utilized, must be submitted. Facilities that are using a trust account should include a copy of the most recent account statement.

Note Facilities using "Local Government Financial Test" must provide the information required in R315-309-3(7)(d) each year.

Ground Water Monitoring: Each facility that is required to monitor ground water must submit a ground water monitoring report that contains water elevations, sampling results, and statistical analyses. Check box if facility is exempt from ground water monitoring ☒

Explosive Gas Monitoring: A gas monitoring report must be included unless the facility is a Class II landfill that has receive an exemption, a Class III, IV, or VI landfill, or any other facility that has an exemption. Check box if facility is exempt from gas monitoring ☒

Training Report: A report of all training programs or procedures completed by facility personnel during the year.

Signature: [Signature] **Date:** Feb. 27, 2006

Signature should be by an executive officer, general partner, proprietor, elected official, or a duly authorized representative. A duly authorized representative must meet the requirements of the solid waste rules (UAC R315-310-2(4)(d)).

Print name: Wilbert van der Stappen **Title:** President